THE STATE OF NEW HAMPSHIRE JUDICIAL BRANCH

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Court Name:			
Case Name:	Estate of		
Case Number: (if known) STATEMENT OF VOLUNTARY ADMINISTRATION			ON
ESTATE ASS on estate assets.)		I estate assets as reported on Voluntary Administ	
Α			\$
В.			\$
C.			\$
1. TOTA	L ESTATE ASSETS AND INC	OME	\$
	FROM ESTATE ASSETS AND avit and income earned on estate assets.)	NCOME (List only expenses paid from e	state assets reported on Voluntary
Α. Ι	Funeral expenses and last sick	ness	\$
	Other bills paid such as debts, (List each specific bill and amount below.)	taxes and estate expenses	\$
- -			
2. TOTA	L BILLS PAID FROM ESTATI	E ASSETS AND INCOME EARNE	D \$
	NCE IN HAND TO BE DISTRI AFTER RECEIVING THE CO	BUTED TO LEGATEES OR HEIR URT'S APPROVAL	S s
I,above is a true	e and accurate statement of my	, Voluntary Administrato administrato administration.	or of the estate, state the
Date		Voluntary Administrator Signature	
	State of	, County of	
This instrume	nt was acknowledged before r	me on by	
	on Expiresn	Signature of Notarial Office	r / Title

Case	Name: Estate of				
Case	Number:				
STAT	TEMENT OF VOLUNTARY ADMINISTRATI	ON			
	ORDER				
	This statement is approved.				
ш	This statement is approved.				
	This statement is disapproved.				
Date		Judge of Probate			